

Oct. 2003

BI- ANNUAL

HAPPY  
HALLOWEEN

# KBRC NEWS & VIEWS

## The 2004 Renewal Cycle is Almost here

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Contact Board : (859)- 246-2747 or online at : <http://kbrc.ky.gov>

All respiratory care practitioners whose license expire on 01/30/2004 will receive renewals a little earlier this year. The KBRC office will be mailing to the therapists in November instead of December, this will give an extra thirty days to get their renewals processed. The renewal form this year will be modified slightly for CEU carry-over information. The KBRC has also incorporated the financial loan status request on the renewal to make the process easier and prevent loss of paperwork. The renewals are to be filled out completely and accurately in order for us to maintain an accurate database. If you have moved, or will move, if you have a name or address change, you must tell us as soon as possible. So call, fax or email Ms. Moore.

*The date on your card is the actual expiration date.* Once this date has passed you will no longer be able to continue to practice if you have not renewed the license. The KBRC does allow a period of thirty days from the expiration date on your card with a **\$60.00** late payment. After March 2, 2004 the Respiratory license of the individual who has not renewed is then **Terminated**, and will result in the therapist having to reinstate and pay a **\$70.00** fee. The KBRC looks forward to having all of it's Practitioners renew for another two year cycle .Your respiratory work is appreciated in Ky.

## Check out a Correspondence CEU

The KBRC has given approval to **National Medical Education** from California. They are a CEU provider which is offering quality correspondence courses for the respiratory care practitioner. They offer a great range of CEU's and the credit hours are great for therapists who wish to take a couple courses to get back after being out of the field for whatever reason. They have a toll free phone number that they can be reached at 1-866-605-3664. Listed below are some of their courses and credit hours:

Pulmonary Patient Assessment .....	12 credit hours
Cardio-Pulmonary Pharmacology .....	17 credit hours
COPD Interpretation Standard .....	15 credit hours
Respiratory Neonatal .....	15 credit hours
ABG Interpretation .....	10 credit hours
Pulmonary Disorders .....	12 credit hours
ECG Arrhythmia Interpretation .....	9 credit hours

## Board's Administrative Assistant - Riding For A Cause



I purchased a new motorcycle this past summer and have begun riding again after 20 years. One of the great things about riding motorcycles is the ability to get out and meet other people. I have already participated in two worthwhile activities.

One being Lexington's 3rd annual Ride to Win for the Special Olympic kids, which resulted in 500 bikes two abreast cruising around New Circle Rd. being led by John Michael Montgomery and raising \$45,000 dollars, and the other being a Ride in Versailles, KY to raise money to fight Cystic Fibrosis. I have met some wonderful and colorful people at these functions, and was amazed at how many of the riders who participated were respiratory care practitioners, nurses, doctors and other professionals. Be-

neath all that leather and loud pipes, lies a lot of warmth and heart from the motorcycling community. So next time you see a motorcycle pull up beside you at a intersection or coming down the highway, remember he or she may be riding for a good cause, a cause that may be part of your profession.

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## Home Care - Setup for prescribed (OCD)

**Article by Stephen N. Conn, Vice Chairman of the KBRC, Respiratory Care Therapist**

In Response to inquires regarding the setup of patients who are prescribed Oxygen Conserving Devices (OCD) it is the belief of the Kentucky Board of Respiratory Care (KBRC) that respiratory therapy practitioners should perform patient assessments along with a pulse oximetry (resting and exercise). The findings should then be reported to the physician to determine if the level needs adjusting based on the activity the patient is performing.

Measurements of the baseline saturations are essential during oxygen therapy. The measurements may be used to determine the appropriate flow for ambulation and exercise.

These measurements should be repeated when clinically indicated or to follow the course of the disease. Findings and recommendations should again be reported to the physician so that adjustments to the levels can be made as indicated by the results.

Each individual company should perform competency testing of the therapist's evaluation skills and their abilities to perform setups. Written documentation which includes instruction manuals for the conserving devices and troubleshooting tips should be provided to each therapist. Proper education of the patient on the device is essential for the patient to use the device effectively.

Any questions or concerns please feel free to contact the KBRC office or visit the KBRC web site at <http://kbrc.ky.gov> .

Stephen N. Conn  
Vice-Chairman

## For the Record: List Of Therapist Who Have Not Renewed

Adkins, Tony M.	Huddleston, Tom L.	Schaffer, Carolyn S.
Anderson, Gloria J.	Hughes, Natashaia	Schindler, Lana M.
Anderson, Jonathan E.	Jarrett, Terika L.	Schmittou, Tina M.
Arnold, Jason B.	Jessee, Stephanie A.	Schultheis, Jody W.
Barker, Mark S.	Johnson, Lyndon B.	Scifres, Carla J.
Bell, Annette	Kerns, Hazel C.	Seger, Brandy M.
Benedict, Gary H.	Klapheke, Wanda J.	Seitz, Michael G.
Black, Alisha D.	Knapp, Marla S.	Shipp, James R.
Bond, Christina M.	Leger, Derrick J.	Shively, Lisa A.
Bowling, Michael L.	Little, Dorothea E.	Sierra, Terry L.
BuGay, John A.	Long, Leonard R.	Smith, Gloria J.
Burris, Tammy R.	Love, Christie	Smith, Shelly R.
Butler, Beverly A.	Lutman, Jenifer S.	Somers, Cheryl A.
Calvert, Kellie A.	Maines, Monica K.	Steffen, Randy L.
Childers, Deborah A.	McCarty, Randall	Stevens, Christina R.
Clark, Jr., Edgar	McDaniel, Dorothy R.	Stewart, Mary L.
Clonch, Jerimy L.	McDonie, Lori M.	Stites, Rodney A.
Coffey, Michael A.	McDuffee, Philip R.	Tallent, Karen J.
Cook, Carol J.	Meaney, Scott T.	Tanner, Christopher
Crabtree, Robert C.	Messer, Naomi	Taylor, Marcia L.
Crasher, Peter C.	Miller, Gary C.	Thompson, Claudia A.
Curran, Debra K.	Mitchell, Joni L.	Thompson, Melissa G.
Cyrus, Heather M.	Mobley, Ronald G.	Thompson, Ronnie
Daugherty, James Perry	Morris, Sarah J.	Tipton, Melody G.
Davis, Diane M.	Norris, Kristin R.	Turner, Kenneth J.
Davis, William T.	O'Brien, Gerald U.	Vaughn, Billy J.
Drane, Taryn R.	Ovadia, Susan M.	Voss, Richard W.
Edens, Jerry R.	Owens, Deborah B.	Wallingford, AmyJo D.
Embry, Deborah C.	Paris, Lisa A.	Wampler, Pamela S.
Etienne, Nancy A.	Pate, Lee Anne	Wardrup, Lori A.
Fisher, Candace M.	Penn, Elizabeth W.	Way, Gary D.
Foster, Stephan L.	Penney, Trena	Webb, Julia M.
Fryar, Stephen W.	Phillips, Mark R.	Wever, Robin L.
Fulkerson, Charlotte L.	Pierce, Mark L.	White, Amy L.
Gaslin, Rebecca Jo	Porter, John Richard	Williams, Tammie W.
Gibbs, Jacklyn L.	Price, Mistee M.	Woods, Evadean
Gleason, Robert A.	Pugh, Karen M.	Ziegler, Charlene C.
Grado, Patricia A.	Quiroa, Sharon B.	
Hardin, Marty A.	Ramey, Joe R.	
Hardin, Sheila Jo	Richey, Richard T.	
Harris, Phyllis J.	Rigdon, Linda G.	
Harrison, Brian T.	Roberts, Lanita L.	
Hensley, Denny R.	Roden, Stanley R.	
Holder, Kimberly A.	Rossetter, Alan S.	
Hotchkiss, Trisha L.	Salko, Peter M.	

We have been in Lexington, KY for the last 3 years and you may reach us at the address, phone, and fax listed below:

### **KENTUCKY BOARD OF RESPIRATORY CARE**

301 East Main Street, Suite 900 Lexington, KY 40507

Phone: (859) 246-2747 Fax: (859) 246-2750 Find us online at: <http://kbrk.ky.gov>

# **Respiratory Students benefit at Bellarmine**

Bellarmino University and the Kentucky Community and Technical College System have signed an agreement that permits students graduating from any KCTCS associate degree respiratory therapist program to apply to Bellarmine University with junior standing. Students will be able to complete the bachelor's degree in two years with 60 credit hours of additional study at Bellarmine University. For more information, call Mary Abrams at (502) 418-6786.

## **Seriously, Humor May Be Good for the Heart**

How frequently do you enjoy a rich, hearty laugh?

If the answer is "often," then your laugh may be heartier than you know, say researchers at the University of Maryland Medical Center in Baltimore.

Their study, which came out last year, suggests that regular doses of laughter may protect you against a heart attack. The research indicates that people with heart disease are 40 percent less likely to laugh in various situations than are people of the same age who don't have heart disease.

The study may be the first to draw a direct link between laughter and a healthy heart, but for some health professionals and lay people alike, the research just back ups what they've been preaching and practicing for years -- that a sense of humor and a positive attitude are powerful rim shots against ill health.

"The old saying that 'laughter is the best medicine' definitely appears to be true when it comes to protecting your heart," said Dr. Michael Miller, director of the Center for Preventive Cardiology at the University of Maryland Medical Center, in a news release.

Miller said center researchers aren't sure how a sense of humor may help stave off heart disease. But they do know that mental stress is associated with the breaking down of the protective barrier lining the blood vessels. This breakdown can lead to the buildup of fat and cholesterol in coronary arteries and eventually to a heart attack, Miller said.

The study involved 300 people, half of whom had either suffered a heart attack or had undergone coronary bypass. The other half were of similar age but were free of heart disease. All the participants filled out two questionnaires, one designed to determine how often they laugh in certain situations, and the other measuring anger and hostility.

People with heart disease -- America's No. 1 killer -- had a harder time finding humor in potentially uncomfortable situations. And even in positive situations, they laughed less than did people with healthy hearts. Plus, participants with heart disease were more prone to anger and hostility.

"We know that exercising, not smoking and eating foods low in saturated fat will reduce the risk of heart disease," Miller said in the news release. "Perhaps regular, hearty laughter should be added to the list."

**This article was taken from Apria Healthcare.** <http://www.apria.com/channels/0,2748,93-177,00.html>

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### **On the Humorous Side**

#### **Things to Ponder while waiting for the Doctor**

Why is it considered necessary to nail down the lid of a coffin?

Why don't you ever see the headline "Psychic Wins Lottery"?

Why doesn't glue stick to the inside of the bottle?